## PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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ppropriate. All further adicated unless correcte naintenance fee notificat	ed below or directed oth	ng the Patent, advance of nerwise in Block 1, by (a	rders and notification of n  a) specifying a new corres	pondence address; a	nd/or (b) indicating a	separat	e "FEE ADDRESS" for								
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45736	7590 09/29	/2010			ficate of Mailing or Ti		via EFS								
Christopher M.	Goff (27839)		I her	reby certify that this	Fee(s) Transmittal is b	eing de	eposited with the United								
Suite 1800				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)											
								St. Louis, MO 63	3105						(Signature)
															(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	OR ATTORNEY DOCKET NO. CONFIRM		CONFIRMATION NO.									
10/719,613 11/21/2003		L.	Jason Matthew English		18027 (27839-1147)		3131								
ITLE OF INVENTION															
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I	FEE TOTAL FEE(S) 1	DUE	DATE DUE								
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EXAMINER		ART UNIT	CLASS-SUBCLASS												
SU, SUSAN SHAN		3761	604-358000												
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			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,												
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.												
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. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	ГНЕ PATENT (print or typ	pe)											
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee oletion of this form is NO	data will appear on the pa T a substitute for filing an	atent. If an assignee assignment.	is identified below, the	ne docu	ment has been filed for								
(A) NAME OF ASSIC	GNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)												
Kimberly-Clark Worldwide, Inc.			Neenah, WI												
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Typed or printed name Richard L. Bridge				Registration No											
n application. Confident abmitting the completed	tiality is governed by 35 I application form to the	U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office	imated to take 12 mi idual case. Any com	nutes to complete, incluments on the amount of	luding g of time	athering, preparing, and you require to complete								

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